

Certified Mississippi Purchasing Agent Application Form

PLEASE READ APPLICATION THOROUGHLY. COMPLETE ALL SECTIONS. PRINT OR TYPE.

RETURN TO: purchasingandtravel@dfa.ms.gov

This designation requires a purchasing position for the State of Mississippi. A purchasing position is one where the incumbent spends the majority of work time making final decisions on procurement methods, contract and purchase order terms and conditions, source and price, whose decisions may be subject to approval by a purchasing manager, and conducting source selection processes.

OPTFM USE ONLY

A. PERSONAL INFORMATION:

Date submitted: _____

Mr. ____ Ms. ____ Mrs. ____ Dr. ____ (check one if applicable)

Name: Last: _____ First: _____ M.I. _____

Agency: _____ Official Position/Title: _____

Work Address: _____

City: _____ Zip Code: _____ County: _____

Work E-mail: _____

Work Phone: (_____) _____ Work Fax: (_____) _____

Approved

Date

B. LIST YOUR CLASS DATE BY FIRST, SECOND, OR THIRD CHOICE (see OPTFM website for dates)

_____ 1st Choice

_____ 2nd Choice

_____ 3rd Choice

C. WORK EXPERIENCE:

List current public purchasing position on the first line below. List other previously held procurement related positions on subsequent lines. You must be currently employed in a public purchasing position, to qualify for the Certified Mississippi Purchasing Agent program. **To ensure that you meet the current experience criteria, include an official job description with this application.** Applications without the Official Position Description will not be considered until such time as they are provided. If the position description does not list purchasing responsibilities, a working position description will be required to complement the official position description and to substantiate purchasing functions. A working position description must be signed and dated by your immediate supervisor.

RESUMES ARE NOT ACCEPTABLE AS A SUBSTITUTE FOR OFFICIAL OR WORKING POSITION DESCRIPTIONS.

Dates Employed (From mm/yy to mm/yy)	Employer	City/State	Official Title

D. CANCELLATION POLICY

If you sign up for a CMPA Class and are unable to attend, please notify Kathy Kehle at Kathy.Kehle@dfa.ms.gov in the Office of Purchasing, Travel and Fleet Management at least a week prior to the registered class. Failure to do so, will result in your agency being billed for the amount of \$75.00 to cover the CMPA Class.

E. AFFIRMATION STATEMENT

I hereby affirm that the statements and information set herein are true and correct, and that any falsification or willful misstatements or omissions intended to mislead the State of Mississippi Office of Purchasing, Travel and Fleet Management will forfeit my right to certification as a Certified Mississippi Purchasing Agent.

Signature of Applicant

Date